

DEVELOPING COMMUNICATIVE SKILLS – SOME TIPS AND PRACTICAL EXAMPLES FOR TEACHERS OF ENGLISH

Introduction

Developing communicative skills has always been one of my main teaching objectives. And my main concern has always been the same – how to involve all the students in speaking and how not to let the taciturn ones answer ‘I don’t know’ for the umpteenth time. The solution I have come up with is **role play** and **role assignment**.

I started using role play already as a young teacher and I instinctively felt that it served its purpose – developing students’ communicative skills. Later on, I came across a book called *Role Play* and I discovered that its author Gillian Porter Ladousse is a strong advocate of role play as a way of teaching the skill of successful communication. What I intuitively felt was good for my students, Gillian Porter Ladousse expressed in the following way (Ladousse 1987: 9):

Role play belongs to the category of language learning techniques sometimes referred to as low input – high output. This means that the teacher-centred presentation phase of the lesson is very short and not at all the same as it would be for a controlled practice drill. After a brief introduction, the students plunge into an activity in which accomplishing the task is more important than using the exact word, in which fluency predominates over accuracy.

The above quotation emphasizes two main advantages of role play techniques: they make classroom activities more student-centered and they introduce spontaneity, which imitates natural language context.

Yet, all teachers are aware of the fact that some learners talk easily, others do not talk at all. The activities I present below give students time to think what they would like to say and how to present their opinions. Those activities are as follows:

1. a guessing game
2. a debate
 - a) with assigned roles;
 - b) without role assignment.

1. A guessing game

The task is a short warm-up activity to introduce a new topic, or to get students going on a dull grey morning. The teacher provides a general topic, such as *money, fame, fashion, love, etc.* and distributes scraps of paper with assigned roles. Then the teacher asks the students to talk on the subject from the perspective of the person but not in a direct way. The others are supposed to guess who is talking. For obvious reasons, a teenage girl will say something totally different about fashion than a priest or a granny. The activity is designed for up to 15 minutes but may be prolonged. In more active groups, a spontaneous exchange of opinions may follow. It sometimes happens that students keep talking even though all the roles have been guessed. An element of humour is introduced; it is amusing to see your students eagerly defending 'their' attitude towards e.g. money from the perspective of a 5-year-old child or a nun.

This activity is suitable for a variety of levels, from lower intermediate to advanced. The only drawback is that one may find it difficult to come up with as many distinct individuals as there are students in a group and thus to assign a separate role to all of them. Then, the teacher may ask them to work in pairs. Less advanced students will appreciate it because working in twos they feel more secure.

EXAMPLE

Topic: money

Roles: an unemployed mother of four
 a beggar
 a top model
 a lottery winner
 an old-age pensioner
 a spoilt teenage daughter of a wealthy businessman
 a five-year-old child
 a catholic priest
 a professor in philosophy
 a Polish nurse
 a corrupt politician

If it turns out that the students cannot guess, let them ask questions.

With this type of exercise variations are possible. On another occasion the teacher may divide the students into four or five groups and provide a different topic to each one. Then the teacher asks them to prepare a speech on the topic provided, each group dealing with a different one. An element of competition can be introduced – the group with the most veiled description wins. Here one may have a variety of topics ranging from *jealousy, boredom or happiness* to *dating, being late, failing an exam or getting engaged*. They can be employed in groups of different levels of language competence (e.g. *Guess my profession* or *Guess*

who I am?') and are suggested by some textbooks (e.g. *Total English Upper Intermediate* 2006: 64).

2. A debate

A debate teaches students to formulate and present arguments as well as defend them against the counterarguments of others. It is a long activity, designed to take up most of a class, and it requires some preparation on the teacher's side. A debate must touch upon subjects the students will feel confident and comfortable with. That is why I suggest you plan a debate at the end of a whole series of classes devoted to one subject. Your students will then have an appropriate range of vocabulary. A debate may be very general and touch upon phenomena that students are not indifferent to, or it can be triggered by some current issues in the country (on condition that your students are advanced enough to cope with the subject). A controversial topic will always serve the purpose best.

Goals:

Doing this kind of activity, many goals may be achieved:

- Students practise preparing longer, structured speeches (in the preparatory phase);
- They learn to react to the arguments of others and defend their standpoint;
- They revise a wide range of vocabulary and learn some new;
- In more active groups the teacher's role is marginalized (which is one of the prevailing trends in foreign language teaching these days), the students will take over; the teacher's role is limited to activating the shyer ones;
- It imitates a real-life discussion (I have seen many students defend their position with great passion even after the lesson was over).

Suggested topics:

Here are some of the subjects I have successfully discussed with my students:

1. Plastic surgery – pros and cons – a debate (based on my own idea and materials – handout 1);
2. A young offender sentenced to two years in a luxurious detention centre (*Lifelines Intermediate*, p. 42 – handout 6.1 combined with my own addition to the exercise – handout 6.2);
3. A single unemployed mother of three children was convicted of shoplifting for the third time in an out-of-town store. She was sentenced to three months in prison and her children were put into care. Express your opinion upon the sentence;
4. A 16-year-old boy was caught writing graffiti on a newly renovated building for the second time. The judge said that he wished he could put the boy

in prison but because he couldn't due to his young age he decided to sentence his parents to a heavy fine, claiming that it was their fault that the young man had behaved so irresponsibly. Express your opinion on the judgement.

English textbooks offer plenty of topics that are suitable for this kind of activity.

1. A doctor who had been working for thirty hours without a break and gave the wrong drugs to a patient. As a result the patient died (Newbrook et al. 2006: 144);
2. Three children aged ten, eleven and twelve who deliberately damaged a railway line. As a result, a train came off the line and several people were injured (Newbrook et al. 2006: 144);
3. David Smith, 34, of New Jersey, created the Melissa computer virus – the first major virus spread by email. The virus caused more than US\$80 m in damage (Newbrook et al. 2006: 145);
4. A judge ordered an 82-year-old man to pay \$6,000 damages to a burglar for leg injuries he suffered while robbing the old man's house. The pensioner had used an unlicensed gun to prevent the burglar from escaping with his electrical equipment (Newbrook et al. 1996: 45).

EXAMPLES

I will present the main idea behind it with two examples: "Plastic surgery" – with assigned roles; and "A detention centre" – without role assignment.

1. Plastic surgery

- introduce the topic;
 - pre-teach useful vocabulary – handouts 2, 3, 4, 5;
- It is hardly possible to use all the materials I have included during one class; besides, there is no need to overwhelm your students with so many materials. That is why I suggest you select those most suitable for the level of your group and your particular objectives. With more advanced students, it would be a good idea to introduce some terminology because they will be able to understand it and they will use it in the discussion. If you, for example, decide to introduce materials about Botox, your students might use the information to support their point of view. Some materials can be used after the debate, e.g. advice for those considering plastic surgery or interesting facts about the history of plastic surgery, or the use of various 'cosmetics' in the past. Besides, you will have something to resort to if the debate is shorter than you originally planned;
- inform your students that you will have a televised debate;
 - ask them if they would prefer to be in the 'for' or 'against' team and rearrange the group into two teams; if there are some who cannot make up their mind, do not force them, tell them they will be the audience and that you

will ask them later on whose arguments they find more convincing, which side of the argument they would support now, and why;

- assign roles:

Distribute handouts with assigned roles and make sure you remember who is who; provide some ideas if you feel your students may need some guidance as to what you expect from them – handout 1; tell them to keep it secret who they are till the moment the debate starts (they have a lot of fun, discovering that Barbra Streisand or Cher are among the roles). Here are some suggestions:

FOR	AGAINST
a psychologist	a psychologist
an actress	Barbra Streisand
a teenager	a parent of a teenager who insists on having an op
a plastic surgeon	a plastic surgeon
Cher	a catholic priest
	a teenager after an unsuccessful operation

- act as the host in the debate:

After they have been given some time to prepare what they will say, make a short introduction, introduce one of your guests, and the debate will hopefully follow without much interference on your part. But if you see it petering out you can introduce another guest and ask him/her to present their story or arguments.

If you need to assign more roles than I have suggested or you can come up with, have more people who would like to be operated on, or who have undergone plastic surgery and are willing to share their experience.

If there are students who are acting as the audience, do not forget to refer to them from time to time to ask whose arguments they find more convincing. Allow them to join one of the sides.

2. A detention centre

This topic should be presented at the end of a whole series of classes devoted to crime and punishment. That way you will not need to pre-teach much vocabulary.

Suggested procedure:

- Distribute handout 6.1;
- Explain what a detention centre is;

Detention centre – a kind of prison for young people where they are only kept for short periods of time

- Ask Ss to present the case and to describe facilities in the detention centre;
- Ask Ss about their immediate reaction to the verdict of the court – whether they support or oppose it;

- Ask your students to form two groups of supporters and opponents of the verdict;
- Ask them to think of arguments to support their point of view;
- Ask one group to present their arguments and the other to respond to them;
- Encourage those opposing the verdict to come up with their solution;
- Present additional information – handout 6.2;
- Ask opponents of the verdict if in the light of this information they have changed their opinion about the verdict, and ask them to justify their standpoint;
- Ask both groups to draft a letter either supporting or criticizing the verdict. If you feel there is no time for that, assign the letter as homework;
- Make sure that Ss do not associate ghettos only with WW2, provide a definition

Ghetto – a part of a town or city in which underprivileged people live, discriminated against because of their race, religion or nationality; pl. ghettos or ghettoes

- Show them the lyrics of *In the Ghetto*. Explain that the song is about a similar boy;
- Ask them to talk about the atmosphere in the song, e.g.:
The atmosphere is gloomy, depressing; it's winter, it's snowing
Words and phrases that build up the atmosphere: *gray, a poor little child, a hungry little boy with a runny nose, the cold wind blows, his hunger burns, he starts to roam the streets at night, desperation, etc.*
- Ask your students to find grammatical mistakes, they will probably be aware of the fact that such 'errors' are acceptable in lyrics;
- Play the song. Ask your students to fill in the missing words.

Role play activities are both teacher and student friendly. They teach and entertain, and therefore I would highly recommend them to all language teachers.

Bibliography

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Appendix

HANDOUT 1

FOR

<p>A PSYCHOLOGIST</p> <ul style="list-style-type: none"> • today's world pays a lot of attention to physicality, whether we like it or not, we are judged by our looks • low self-esteem is a serious inhibitor
<p>AN ACTRESS</p> <ul style="list-style-type: none"> • good looks helps a lot in a successful career (provide examples: what did your career look like before the surgery, how did it change after it?)
<p>A TEENAGE GIRL</p> <ul style="list-style-type: none"> • you have a hooked nose • you are made fun of (make a story how you were bullied at school) • you have serious psychological problems; lack of self-acceptance
<p>A PLASTIC SURGEON</p> <ul style="list-style-type: none"> • this is what plastic surgery is for – to make us feel more attractive, more desirable • with basic precautions nothing can go wrong
<p>CHER</p> <ul style="list-style-type: none"> • you have had many operations (tell us what you were operated on), you are not ashamed of that • plastic operations are addictive, you want more and more • your fans judge you upon your looks, they want you to look young

AGAINST

<p>A PSYCHOLOGIST</p> <ul style="list-style-type: none"> • it will not make you a different person • the problem is in the mind and not in unattractive appearance; people should learn to accept themselves • plastic surgery is not a solution to our problems
<p>BARBRA STREISAND</p> <ul style="list-style-type: none"> • resisted plastic surgery though was strongly advised to do something about her Roman nose when cast for one of her films (make a story: what film, when, did they give in?) • talent is more important than appearance
<p>A TEENAGE GIRL</p> <ul style="list-style-type: none"> • you had ear surgery (why, what problems did you have – with self-esteem or lack of peer acceptance) • it was supposed to be easy, doctors didn't anticipate any complications • something went wrong, you have ugly scars, another surgery is awaiting you
<p>A PLASTIC SURGEON</p> <ul style="list-style-type: none"> • all cosmetic procedures carry risks and can go wrong. Patients are advised to think carefully before choosing to undergo a treatment • surgery is not a way to solve problems
<p>A CATHOLIC PRIEST</p> <ul style="list-style-type: none"> • we are God's creations, we should not interfere with His will • we should learn how to be good people, our inner side is more important than our looks
<p>A PARENT</p> <ul style="list-style-type: none"> • your daughter insisted on an operation • you were against • the operation was unsuccessful • there were unforeseen complications • irreversible consequences • expensive treatment

HANDOUT 2

Extreme cosmetics – use of lasers, acids and toxins in cosmetics treatments.

Plastic surgery – a specialty that uses surgical techniques to change the appearance and function of patients' bodies.

Examples:

Plastic surgery	Extreme cosmetics
<ul style="list-style-type: none"> • rhinoplasty /raɪnə'plæstɪ/ or nose job – reshaping of the nose • otoplasty /ɒtə'plæstɪ/ or ear surgery – reshaping of the ear • face lift – removal of wrinkles and signs of aging from the face • liposuction – removal of fat from the body • eyelid surgery – reshaping of the eyelids • breast enlargement or boob job – enlargement of the breasts • breast lift – raising of sagging breasts 	<ul style="list-style-type: none"> • injecting Botox • injecting collagen /'kɒlədʒən/ • injecting silicone /'sɪlɪkəʊn/

Basic facts

- Extreme cosmetic treatments cannot halt the ageing process. They nearly all require regular top-ups to maintain the effect. Wrinkles have a habit of returning.
- Last year in the UK, roughly 65,000 cosmetic surgery operations were carried out. The most popular request was for breast implants, with liposuction a close second. It's an extreme course of action to take and it's expensive (a breast implant op costs £3000 to £4000).
- Breast implants are made of a silicone shell filled with gel or salt-water and they're inserted through an incision, usually made under the breast. After the op, you can expect to be in pain for a few weeks.
- Liposuction involves inserting a small metal tube into a fatty area through a 'stab' incision and then pumping out fat deposits through a syringe. Up to three liters of fat can be removed, and post-operative bruising, numbness and swelling can last between four weeks and several months.
- Rhinoplasty reshapes the nose – making it longer, shorter, smaller, straighter, etc. During most nose jobs, the cuts are made inside the nostrils, so there are no visible scars. The op results in bruising and swelling around the eyes and nose for a couple of weeks.
- Collagen, silicone and fat are known as 'injectible fillers', because they have a wide range of uses – from filling out acne scars and wrinkles to plumping up lips.
- Injectible collagen is a liquid made from the connective tissue of cows or pigs and is inserted under the skin for cosmetic purposes. Eventually the body metabolises the collagen. The effects generally last between a few months and a year and a half. So collagen injections have to be repeated regularly.

Source:

http://en.wikipedia.org/wiki/Plastic_surgery, 28th January 2007.

<http://www.bbc.co.uk/print/science/hottopics/extremecosmetics/index.shtml>, 28th Jan. 2007.

HANDOUT 3

What is Botox?

Botox is a diluted food poison used to temporarily paralyse muscles of the face which are used in frowning and raising the eyebrows.

Is Botox dangerous

YES	NO
Botox is 'botulinum toxin A' – a diluted form of a food poison, which blocks nerve signals and causes paralysis	Botox was licensed by the US Food and Drug Administration for cosmetic use in April 2002
With repeated treatments permanent thinning of the muscles can occur	Tiny amounts of Botox relax the facial muscles used in frowning and raise the eyebrows, removing wrinkles
Side effects can include weakness in neighbouring muscles, a droopy eyebrow or eyelid and headaches	The effects of a single botox injection are only temporary. In three to four months, muscle action returns
Botox injections can interfere with a patient's ability to eat, speak and blink	50,000 vials of Botox were used in the UK last year. Many patients are going back for repeat treatments
The American Academy of Dermatology has issued a warning against Botox parties, especially those involving alcohol	Botox is one of the fastest growing cosmetic treatments in the world

- Botox injections are one of the most popular cosmetic treatments in the world allowing to keep wrinkles at bay. 50,000 Botox injections were ordered in the UK last year.
- Botox first began to be used in 1980 to treat many muscle disorders such as lazy eye, eye ticks and uncontrolled blinking. Cosmetics treatments were pioneered by dermatological surgeons in 1987.
- Injections take effect about three to seven days after treatment and the effect lasts three or four months. A treatment costs roughly £200. With repeated treatments, atrophy or thinning of the muscles occurs, which produces longer lasting results. Botox may be unsuitable for use around the mouth as the muscles there are important for facial expressions and eating.
- When it is overdone, Botox treatment can leave the face with a lack of expression. This is reputed to have caused a problem for some actors.
- Botox is reportedly a favourite with Oscar nominees who don't want to work up a sweat on the red carpet. Some stars have injections in their armpits to paralyse the sweat glands there. This way they can receive their awards knowing they don't have sweaty patches under their arms and hand back their couture outfits unstained.

Source:

<http://www.bbc.co.uk/print/science/hottopics/extremecosmetics/index.shtml>, 28th Jan. 2007.

HANDOUT 4

The origins of plastic surgery

Egyptian physicians may be credited broadly as the earliest contributors to the modern specialty of reconstructive plastic surgery. The „Edwin Smith Papyrus”, the origins of which are dated at approximately 3000 BC, contains the first descriptions of the surgical management of facial trauma, including the treatment of a jaw and a nose. Such descriptions are impressive for their age, for their basis on scientific principles, and for their departure from the superstitious attitudes of the time.

Many hundreds of years would pass before the true birth of reconstructive surgery occurred. Although the precise date is disputed by historians, the first recorded description of actual reconstructive plastic surgery may be traced back over 2600 years to the Sanskrit texts of ancient India. During this period such surgery was needed greatly, as acts of facial mutilation, especially of the nose, were perpetrated commonly in India and its surrounding territories by vicious bands of marauders as a method of visible and lasting humiliation.

As early as the 8th century BC a great Indian surgeon Susrutha was utilizing skin grafts for reconstructive work. His work Sushruta Samhita describes rhinoplasty and otoplasty. This knowledge of plastic surgery existed in India up to the late 18th century as can be seen from the reports published in Gentleman's Magazine (October 1794).

The Hindu justice system also contributed to the need for reconstructive surgery by levying harsh penalties upon its subjects for various crimes, including amputation of the genitalia or nose of an unfaithful spouse. It appears reasonable that the nose, a symbol of dignity and respect in many societies throughout antiquity, should be among the first as well as a recurring subject in the history of plastic and reconstructive surgery.

The Romans were able to perform simple techniques such as repairing damaged ears from around the 1st century BC. In mid-15th century Europe, Heinrich von Pfolzspeundt described a process „to make a new nose for one who lacks it entirely, and the dogs have devoured it” by removing skin from the back of the arm and suturing it in place. However, because of the dangers associated with surgery in any form, especially that involving the head or face, it was not until the 19th and 20th centuries that such surgeries became commonplace.

Fashion fads in history

Men and women have been prepared to suffer for the sake of their appearance for centuries. During her reign, Queen Elizabeth I started a fashion for pale skin. Ladies began to paint their faces with a cream made from powdered white lead, egg white and vinegar. These creams gave the face a shiny appearance and smiling could easily 'crack' the face. The noxious effects of the lead paint caused many problems and even some deaths. In the 1700s, black patches were stuck to the skin to cover the scars caused by toxic face creams.



Fashionably pale
Glenda Jackson as
Queen Elizabeth I

Source:

<http://www.bbc.co.uk/print/science/hottopics/extremecosmetics/index.shtml>, 28th Jan. 2007.

<http://www.emedicine.com/plastic/topic433.htm>, 28th January 2007.

HANDOUT 5

A word of advice

If you're feeling insecure about your body and want surgery, consider this:

- All cosmetic procedures carry risks and can go wrong. Patients are advised to think carefully before choosing to undergo a treatment.
- Cosmetic surgery doesn't make you a different person and it won't suddenly make you more popular or loved. You will still be you, no matter what. Surgery isn't a way to fix your problems.
- The 'body beautiful' image is everywhere, but being perfect can only get you so far. It's what you do in life and not what you look like that's important. Concentrate on getting a good education, finding a job you love and spending time with your nearest and dearest.
- Things may feel bad now, but it won't feel like this forever. Given time, you may grow to accept whatever's troubling you and even appreciate it – it's what makes you individual. Give yourself a few years and, if you still want surgery, start to research it.
- Remember – anyone who judges you by your appearance alone isn't worth your time. They almost definitely have major hang-ups and problems of their own – so don't give them the satisfaction of making you feel unhappy, too.
- If you're deeply distressed by large or very small boobs, acne scars, big ears, a large nose or a birthmark, cosmetic surgery can be a positive step, which can improve the quality of your life. Only a small percentage of people who have this type of surgery are unhappy with the results.

Talk to the right people.

- If you're under 16, you'll need parental permission to have cosmetic surgery.
- Even if they say yes, your GP, who's your next port of call, may refuse to refer you to a surgeon because you're not physically mature enough.
- For example, rhinoplasty can only be carried out when the nose is 90 per cent developed, which may not be until you're 15 or 16.
- If your GP does give you a referral, it's unlikely that your surgery will be carried out on the NHS, unless it's for important health or psychological reasons.
- This means you'll need to find a surgeon who you can trust.
- Your cosmetic surgeon should give you a consultation to ensure that you're doing it for the right reasons and to make sure they understand what you want.
- When everyone's happy, the final stage of the process is the surgery itself.

Source:

<http://www.bbc.co.uk/radio1/onelife/health/atoz/cosmetic.shtml>, 28th January 2007.

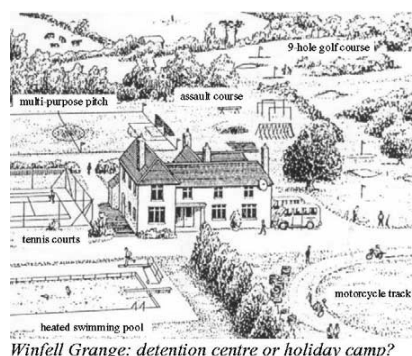
<http://www.bbc.co.uk/radio1/onelife/health/atoz/cosmetic2.shtml>, 28th January 2007.

HANDOUT 6.1

Sentenced to two years of fun

By Arthur Campbell

It was a brutal assault in which an elderly man was almost killed. Yesterday the 17-years-old thug who did it was sentenced to two years at Winfell Grange, a luxury country home where all kinds of sports and games will be provided. If the boy, who can't be named, behaves himself, he'll be taken on a trip to Paris. The cost to the taxpayer of his detention will be £1,000 a week. When they heard the judge's sentence, the victim's family were very angry. Mr Singh, 61, had been hit several times with a piece of wood and was in hospital for weeks after the attack. He has only just started walking again, still suffers headaches and is afraid to leave his house. Winfell Grange, where the boy will be sent, aims to give young people a purpose in life. The boy will have his own room with a television and will have access to computers, table tennis, motorcycles, golf, and a swimming pool. Education will be provided at the local school.



Winfell Grange: detention centre or holiday camp?

Source: Hutchinson Tom, *Lifelines Intermediate*, p. 42.

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HANDOUT 6.2

The young offender's family background.

- The boy was born into an alcoholic family.
- His father left his mother when the boy was three.
- He actually does not remember his father.
- His mother remarried when the boy was six.
- His step-father proved to be a cruel man, the boy was often beaten and left alone and hungry.
- To feed himself and his step-sister he had to steal and shoplift.
- He was caught shoplifting for the first time when only ten.
- He dropped out of school at the age of fourteen.
- He even worked once but his step-father used to take all the money from him.
- He did not work long because his boss found out about his conflict with law.
- He hit the man because he panicked; he was not able to snatch his wallet, and the man saw his face.
- The boy has never experienced anything good in his life – neither parental love nor support, nor acceptance.

HANDOUT 7**“In The Ghetto” Elvis Presley***words & music by Scott Davis*

As the snow flies.
 On a _____ and gray _____
 A poor little baby child _____
 In the ghetto
 And his mother cries
 ‘Cause if there’s one thing that she don’t need
 It’s _____ mouth to _____
 In the ghetto

Now, people don’t you _____
 The child needs a helping _____
 Or he’ll grow up to be an _____ man some day
 Take a look at you and me
 Are we too blind _____
 Or do we simply turn our heads
 And look _____

Well, the world turns
 And a hungry little boy with a runny nose
 Plays _____ as the cold wind blows
 In the ghetto

And his hunger burns
 So he starts to roam the streets at night
 And he learns _____
 And he learns _____
 In the ghetto

Then one night in desperation
 The young man breaks away
 He buys _____, steals _____,
 Tries to run, but he don’t get far
 And his mama cries

As a crowd gathers ‘round, an angry young man
 Face down _____
 With _____
 In the ghetto

As her young man dies
On a _____ and gray _____
Another little baby child _____
In the ghetto
And his mama cries
Now, people don't you ... (*etc.*)

TEACHER'S NOTES

"In The Ghetto" Elvis Presley*words & music by Scott Davis*

As the snow flies
On a **cold** and gray **Chicago mornin**
A poor little baby child **is born**
In the ghetto
And his mother cries
'Cause if there's one thing that she don't need
It's **another hungry** mouth to **feed**
In the ghetto

Now, people don't you **understand**
The child needs a helping **hand**
Or he'll grow up to be an **angry young** man some day
Take a look at you and me,
Are we too blind **to see**
Or do we simply turn our heads
And look **the other way**

Well, the world turns
And a hungry little boy with a runny nose
Plays **in the street** as the cold wind blows
In the ghetto

And his hunger burns
So he starts to roam the streets at night
And he learns **how to steal**
And he learns **how to fight**
In the ghetto

Then one night in desperation
The young man breaks away
He buys **a gun**, steals **a car**,
Tries to run, but he don't get far
And his mama cries

As a crowd gathers 'round, an angry young man
Face down **on the street** with **a gun in his hand**
In the ghetto

As her young man dies
On a **cold** and gray **Chicago mornin**,
Another little baby child **is born**
In the ghetto

GLOSSARY

incision (n, C) /ɪn'sɪʒən/ – a sharp cut made by a surgeon operating on a patient
 swell (v) – swelled, swollen (about parts of a body) become larger than normal as a result of an injury or an illness

top-up (n, C) – another serving of a drink in the same glass that you have just used
Anyone ready for another top-up?

(here) a repeated treatment

numb (adj.) /nʌm/ – unable to feel or move;

unfeeling, frozen, shocked, dazed, paralysed, benumbed

numbness (n, U) /nʌmns/ – the state of being numb

tissue (n, C/U) – a group of cells that are similar to each other and have the same function

droopy (adj.) – bending or hanging down because of weakness or tiredness

blink (v, reg.) – shut and open your eyes very quickly, sometimes several times

take effect a) produce the effect intended or required

b) come into force; operate; become active

reputed (adj.) – believed to be true or to have existed

atrophy (n, U) /'Qtr«fl/ – decrease in size or strength, often as a result of illness

dilute (v, reg.) /dal'ljʊ:t/ – add water or another liquid to make some other liquid less concentrated

couture (n, U) /ku:'tʃ/ – high fashion designing and dressmaking

levy (v, reg.) /'lEvl/ – impose

harsh (adj.) – severe

penalty (n, C) – punishment

graft (n, C) – a piece of healthy skin or bone, or a healthy organ, which is attached to a

damaged part of your body in order to replace it; *transplant*

devour (v, reg.) – eat quickly and with great eagerness

suture (n, C) /'su:tʃ/ – a stitch made to join together the open parts of a wound, especially

one made after a patient has been operated upon

commonplace (adj.) – common, ordinary, usual; occurring and seen very often

noxious (adj.) – (of a substance) harmful or poisonous; (of a smell) extremely unpleasant

hang-up (n, C) – a feeling of fear or embarrassment about something that makes it very difficult for you to deal with certain situations; problem, inhibition; an informal word *adolescent hang-ups*

referral – recommendation

NHS – National Health Service

GP – General Practitioner

op – operation